



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4862

SERIAL NUMBER 10/727,040	FILING DATE 12/04/2003  RULE	CLASS 600	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. 25455-X
-----------------------------	---------------------------------------	--------------	------------------------	-----------------------------------

## APPLICANTS

Sergei Alekseenko, Novosibirsk, RUSSIAN FEDERATION;

Aleksey Evseev, Novosibirsk, RUSSIAN FEDERATION;

Peter Belousov, Novosibirsk, RUSSIAN FEDERATION; Andrey Belousov, Novosibirsk, RUSSIAN FEDERATION;

Lev Diamant, Korazim, ISRAEL;

Yuri Dubnistchev, Novosibirsk, RUSSIAN FEDERATION;

Dmitriy Markovich, Novosibirsk, RUSSIAN FEDERATION;

Vladimir Meledin, Novosibirsk, RUSSIAN FEDERATION;

Aleksander Staroha, Tomsk, RUSSIAN FEDERATION;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/438,275 05/15/2003 PAT 7,018,330  
 which claims benefit of 60/385,888 06/06/2002 *ML*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 03/04/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY RUSSIAN FEDERATION	SHEETS DRAWING 4	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>ML</i> Initials			

## ADDRESS

20529

NATH &amp; ASSOCIATES

112 South West Street

Alexandria, VA

22314

## TITLE

Optical device for viewing of cavernous and/or inaccessible spaces

<p>FILING FEE RECEIVED 520</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees								
<input type="checkbox"/> 1.16 Fees ( Filing )								
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )								
<input type="checkbox"/> 1.18 Fees ( Issue )								
<input type="checkbox"/> Other _____								
<input type="checkbox"/> Credit								